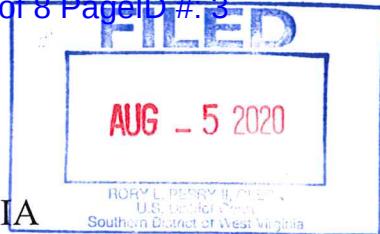


UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF WEST VIRGINIADylan Nichols Stone3558737*(Enter above the full name of the plaintiff or plaintiffs in this action).**(Inmate Reg. # of each Plaintiff)***VERSUS****CIVIL ACTION NO. 2:20-cv-527***(Number to be assigned by Court)*Ralph Terry, Superintendent

<u>Sgt. Shawn Ramsey</u>	<u>Sgt. Nathan Withrow</u>	<u>CO1 Charles Johnston</u>
<u>CO2 Heather Vest</u>	<u>CPL James Taylor</u>	<u>CO2 Dustin Bell</u>
<u>CO2 Skyler Santiago</u>	<u>CPL Blankenship</u>	<u>Sgt. Slack</u>

*(Enter above the full name of the defendant or defendants in this action)***COMPLAINT****I. Previous Lawsuits**

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes _____ No X

B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit:

Plaintiffs: _____

Defendants: _____

2. Court (if federal court, name the district; if state court, name the county);

3. Docket Number: _____

4. Name of judge to whom case was assigned:

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

6. Approximate date of filing lawsuit: _____

7. Approximate date of disposition: _____

II. Place of Present Confinement: Saint Marys Correctional Center WV

A. Is there a prisoner grievance procedure in this institution?

Yes X No _____

B. Did you present the facts relating to your complaint in the state prisoner grievance procedure?

Yes X No _____

C. If you answer is YES:

1. What steps did you take? filed appropriate grievances to prison/ warden and commissioner

2. What was the result? grievances were declined

D. If your answer is NO, explain why not: _____

III. Parties

(In item A below, place your name and inmate registration number in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff: Dylan Nicholas Stone, 3558737

Address: Saint Marys Correctional Center, 2880 N. Pleasants Hwy, St. Marys, WV 26

B. Additional Plaintiff(s) and Address(es): _____

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

C. Defendant: Mount Olive Correctional Complex (MOCC)

is employed as: male maximum security prison

at 1 Mountainside Way, Mount Olive, WV 25185

D. Additional defendants: Shawn Ramsey/Sergeant/MOCC,

Nathan Withrow/Sergeant/Mocc, Charles Johnston/

Corrections Officer 2 (CO2)/MOCC, Heather Vest/CO2/MOCC,

James Taylor / Corporal / MOCC, Dustin Bell / CO2 / MOCC, Skyler Santiago / CO2 / MOCC, Blankenship / Corporal / MOCC, Slack / Sgt. / MOCC
ment of Claim

IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

See attached. (#1)

Attachment #1

On August 12, 2018, plaintiff Dylan Stone was assaulted by use of excessive force at the Mount Olive Correctional Complex in Mount Olive, WV. Plaintiff Stone was restrained, beaten with hands and feet, assaulted with a taser at least eight times, and strangled with shackles for at least 40 minutes. Plaintiff Stone did not receive medical assistance for injuries sustained from the assault for another 40 minutes after the incident. It took almost another hour before Plaintiff Stone's wounds were attended. It would be days before Plaintiff Stone received medical care for possible head injuries as well as fractures in his extremities.

Defendants involved in incident (all were present at MOCC on August 12,2018):

Sergeant Shawn Ramsey: Witnessed the excessive use of force and did nothing to stop it. Allegedly kicked by plaintiff.

Sergeant Slack: Witnessed the excessive use of force and did nothing to stop it.

Corporal Blankenship: Witnessed the excessive use of force and did nothing to stop it.

Sergeant Nathan Withrow: Restrained plaintiff and witnessed the excessive use of force and did nothing to stop it.

CO2 Skyler Santiago: Witnessed the excessive use of force and did nothing to stop it.

CO1 Charles Johnston: Restrained plaintiff and continued to assault plaintiff.

CO2 Heather Vest: Witnessed the excessive use of force and did nothing to stop it as well as assailant.

Corporal James Taylor: Witnessed the excessive use of force and did nothing to stop it.

CO2 Dustin Bell: Restrained plaintiff and witnessed the excessive use of force and did nothing to stop it.

IV. Statement of Claim (continued):

V. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

monetary compensation for injuries, pain and suffering; and punitive damages

V. Relief (continued)):

VII. Counsel

A. If someone other than a lawyer is assisting you in preparing this case, state the person's name:

B. Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?

Yes X No _____

If so, state the name(s) and address(es) of each lawyer contacted:

Joseph D. Garcia, Manchin Professional Building
1543 Fairmont Avenue, Suite 203 Fairmont, WV 26554-2175

If not, state your reasons: _____

C. Have you previously had a lawyer representing you in a civil action in this court?

Yes _____ No X

If so, state the lawyer's name and address:

Signed this 20 day of July, 2020.

Signature of Plaintiff or Plaintiffs

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 7-20-20
(Date)

Signature of Movant/Plaintiff

Signature of Attorney
(if any)